RECD SEP 19

UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

Caption: Wedston I BANKS, Pro Se Full name(s) of Plaintiff(s)	COMPLAINT FOR EMPLOYMENT DISCRIMINATION			
Sommonwealth of PENNA.	CIVIL ACTION NO			
Full name(s) of Defendant(s)				
This action is brought for discrimination in employn	nent pursuant to (check only those that apply):			
2000e-17 (race, color, gender, religion NOTE: In order to bring suit in feder obtain a Notice of Right to Sue Letter Commission.	ral district court under Title VII, you must first r from the Equal Employment Opportunity			
621-634. NOTE: In order to bring suit in feder in Employment Act, you must first file Opportunity Commission, and you m	Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621-634. NOTE: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission, and you must have been at least 40 years old at the time you believe that you were discriminated against.			
NOTE: In order to bring suit in feder	90, as codified, 42 U.S.C. §§ 12112-12117. ral district court under the Americans with a Notice of Right to Sue Letter from the Equal on.			
(race, color, family status, religious c sex, national origin, the use of a guid	as codified, 43 Pa. Cons. Stat. §§ 951-963 creed, ancestry, handicap or disability, age, le or support animal because of blindness, user or because the user is a handler or trainer			

(Rev. 10/2009)

FORM 3 - MOTION TO PROCEED IN FORMA PAUPERIS ("IFP")

In order for the complaint to be filed, it must be accompanied by the filing fee of \$350 plus a \$52.00 Administrative Fee. If you are unable to pay the filing fee, you must file Form 3 – Motion to Proceed In Form Pauperis with the complaint. On Form 3, you must provide an explanation for why you are unable to pay the filing fee. For example: "I am unemployed and have no money except unemployment compensation." Or: "I earn \$____ a week and must support a family of _____."

The judge assigned to your case will decide whether to grant you permission to file your case <u>in forma pauperis</u>. If the judge grants you permission to proceed <u>in forma pauperis</u>, then the U.S. Marshal's Office will serve copies of your complaint on the defendant(s). Therefore, you must give the correct name and address of each defendant.

If the judge does not grant permission to proceed <u>in forma pauperis</u>, then you must pay the \$350 filing fee. You then must arrange to serve the complaint on the defendant(s). The U.S. Marshal's Office will **not** automatically serve the complaint for you if you are not granted <u>in forma pauperis</u> status.

FORM 4 - REQUEST FOR APPOINTMENT OF ATTORNEY

If you desire to have an attorney and believe you are entitled to have one appointed, you should file Form 4 – Request for Appointment of Attorney. Attorneys are selected from the Plaintiff's Employment Panel, as outlined in the enclosed Program Description. Please read this enclosure carefully.

You may obtain a copy of your investigative file. Federal employees may do so from the federal agency involved by calling that agency. Other employees can obtain a copy from the Equal Employment Opportunity Commission (EEOC) by writing to:

Fredricka Warren Christine Spriggs EEOC, Information Specialists 801 Market Street, Suite 1300 Philadelphia, PA 19107

When you have completed your forms, bring them or mail them to:

Clerk of Court United States District Court 601 Market Street, Room 2609 Philadelphia, PA 19106-1797

If you have any questions, you may call the Clerk's Office at (215) 597-7704 and ask for the Pro Se Writ Clerk.

NOTE: You should keep a copy of the forms that you file for your records.

NOTE: In order to bring suit in federal district court under the Pennsylvania Human Relations Act, you must first file a complaint with the Pennsylvania Human Relations Commission or the Philadelphia Commission on Human Relations, and then you must wait one year prior to filing a lawsuit.

A.	List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.						
Plainti	Name: Winston Banks, PRO SE Street Address: P. O. BOX 13417 1720 E. Washington Land County, City: Philade/phia State & Zip: PENNSYIVANIA 19/01 Telephone Number: 267-595-5792 & 267-456-5/88						
B.	List all defendants' names and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the caption on the first page. Attach additional sheets of paper as necessary.						
Defend	dant Name: Immonwealth of Pennsylvania Street Address: 225 Main Capital Blog, Ofe of The Governor County, City: HARRISHURG State & Zip: PENNSYlvania 17/20 Telephone Number: 717-787-2500						
C.	The address at which I sought employment or was employed by the defendant(s) is:						
	Employer: Street Address: County, City: State & Zip: Telephone Number:						
II.	Statement of the Claim						
A.	The discriminatory conduct of which I complain in this action includes (check only those that apply to your case):						
	Failure to hire me						
	Termination of my employment						
	Failure to promote me						

	V [Failure to reasonably accommod	oto mary disphility
		Failure to reasonably accommod	ate my religion
		Failure to stop harassment	
		Jnequal terms and conditions of	my employment
		Retaliation	
	C	Other (specify):	
	mission can	n be considered by the federal di	
В.	It is my b (month)_	pest recollection that the alleged (APRIL, (day) 30, (y	discriminatory acts occurred or began on or about: ear) Z0 22
C.	I believe	that the defendant(s) (check one	e):
		s still committing these acts agains not still committing these acts	
D.		s for discrimination, for example	ased on my (check only those that apply and state, what is your religion, if religious discrimination
	ra	ace Afro-AMERICAN eligion	color
	re	eligion	gender/sex
	n	ational origin	
	a _i	ge My date of birth is sept is asserting a claim of age a	1956 (Give your date of birth only if you are liscrimination)
Е.	The facts	s of my case are as follow (attac	h additional sheets of paper as necessary):
	EXI	nbit-B	

NOTE: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, the Pennsylvania Human Relations Commission, or the Philadelphia Commission on Human Relations.

III.	Exhaustion of Administrative Remedies:						
A.	It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on: 17, 2018 (Date).						
B. The Equal Employment Opportunity Commission (check one):							
	has not issued a Notice of Right to Sue Letter. issued a Notice of Right to Sue Letter, which I received on 6/30/22 (Date).						
	NOTE: Attach to this complaint a copy of the Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.						
C.	Only plaintiffs alleging age discrimination must answer this question.						
	Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding defendant's alleged discriminatory conduct (<i>check one</i>):						
	60 days or more have passed. fewer than 60 days have passed.						
D.	It is my best recollection that I filed a charge with the Pennsylvania Human Relations Commission or the Philadelphia Commission on Human Relations regarding the defendant's alleged discriminatory conduct on: (Date).						
E.	Since filing my charge of discrimination with the Pennsylvania Human Relations Commission or the Philadelphia Commission on Human Relations regarding the defendant's alleged discriminatory conduct (<i>check one</i>):						
€N\$#Sit.	One year or more has passed. Less than one year has passed.						

WHEREFORE, Plaintiff prays that the Court grant such relief as may be appropriate, including

IV. Relief

	Direct the defendant to hire the plaintiff.
	Direct the defendant to re-employ the plaintiff.
	Direct the defendant to promote the plaintiff.
	Direct the defendant to reasonably accommodate the plaintiff's disabilities.
	Direct the defendant to reasonably accommodate the plaintiff's religion.
	Direct the defendant to (specify):
<u> </u>	If available, grant the plaintiff appropriate injunctive relief, lost wages,
	liquidated/double damages, front pay, compensatory damages, punitive damages,
	prejudgment interest, post-judgment interest, and costs, including reasonable
	attorney fees and expert witness fees.
V	Other (specify): REPEAL THE "AT Will "Employment LAW

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 19 day of Sept , 2022

Signature of Plaintiff Address

Commonwealth of Pennsylvania - Notary Seal Gerald J. Laughlin, Notary Public Philadelphia County My commission expires May 20, 2024 Commission number 1092789

Member, Pennsylvania Association of Notaries

Telephone number

Eax number (if you have one) WINSTONLANKS 59@ 9MAIL. Com

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EXHIBIT-A

PENNDOT

Bureau of Maintenance and Operations (BOMO) Transportation Technician 907 Elmerton Avenue Harrisburg, PA 17110 717-525-2998

YORK COUNTY PENNSYLVANIA

Children, Youth and Families 100 West Market St. York, PA 17401 717-846-8496

EXHIBIT-B

EEOC Charge Narrative

Case 2:22-cv-03762-KSM Document 1 Filed 09/19/22 Page 9 of 12

EEOC Form 5 (11/09)			/inal CL	70 No(a).
C HARGE OF D ISCRIMINATION	Charge Presented To:	Agency	y(ies) Charg	ge 140(S):
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act	FEPA			
Statement and other information before completing this form.				
	Line of the state			and EEOC
State or local Agency, i	fany			
Name (Indicate Mr., Ms., Mrs.)		Home Phone (Incl. 2675955	1	Date of Birth 09/01/1956
Winston James Banks		2073933	1/92	09/01/1930
Street Address City, State and ZIP Co P.O. Box 13417, Philadelphia PA 19101				
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship C Me or Others. (If more than two are named, list under PARTICULARS below.)	ommittee, or State or Local Gove	ernment Agency	y That I Belie	eve Discriminated Against
Name Commonwealth of Pennsylvania	1		es, Members	
Street Address City, State and ZIP Co	de			
Ofc of the Governor, 225 Main Capitol Bldg, Harrisburg PA 17120				
Name		No. Employees, I	Members	Phone No. (Incl. Area Code)
Street Address City, State and ZIP Co	de			
		т		
DISCRIMINATION BASED ON (Check appropriate box(es).)	NATIONAL DISTRIBUTION AL		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest	
RACE COLOR SEX RELIGIO			08/02/2	2017 01/13/2022
RETALIATION AGE DISABILITY	GENETIC INFORM	MATION		
OTHER (Specify)				
Complainant is filing this action under the Federal Statute United Stemployed with the Commonwealth of Pennsylvania as a Transport purpose of assisting the lead tech to collect road side data. The typup. The job assignments had required the two man team to travel The second position was that of the Case manager for the County it was a 40 hour work week position that averaged over 50 hours it was a 40 hour work week position that averaged over 50 hours it was a 40 hour work week position that averaged over 50 hours it was a 40 hour work week position that averaged over 50 hours it was a family members not residing in need of social monitor their progress, conduct mandatory home visits to verify at well being visits to family members not residing in the home. and needed. Both positions I was unjustly and unduly terminated in performance still am a licensed professional vehicle operator in possession of a of Philadelphia transit Authority modes of transportation (SEPTA). as a Case Manager with Lutheran Children and Family Service Phila to Truancy Case Manager then ARS (Alternative Response System). Attachments are enclosed for further information.	cation Tech. My duties involve vehicles used were pane to the four corners of the Coof York in the agency of Choer week. The position involves. Duties required and monitor the safety and connecting family member ce of my job. Regarding the Class B CDL license. This license the Class B CDL license this license adelphia PA. I initially start	Commonweal Damon Commonweal Damon Pr My commission	th of Pennsy At Hollis, filliddelphia on expires S	o trucks and a 3/4 pick of trucks and a 3/4 pick milies. Administratively er the entire County of children schools to lily members, conduct for assistance when a position I was and hile operating the City with previous experience truant Officer). Promotect want Officer Promotect was a Notary Public
	NOTARY – When necessary for State or			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	Philadel phia I swear or affirm that I have read	the above charge	de in O	true to the best of mv
I declare under penalty of perjury that the above is true and correct.	knowledge, information and bel	let Lun	ton /	Jan
April 30, 2022	SUBSCRIBED AND SWORN TO BEFORE	ME THIS DATE	Į.	,
Date Charging Party Signature	(month, day, year)	000	. A	
	May 1,2002 Decener			

EXHIBIT-C

Exhaustion of Administrative Remedies

PHRC

York County Children, Youth and Family Services

Case No. 201606145

Date-February 20, 2018

PENNDOT (BOMO)

Transportation Technician

Case No. 201502047

Date-November 17, 2017

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Philadelphia District Office 801 Market St, Suite 1000 Philadelphia, PA 19107 (267) 589-9700

Website: www.eeoc.gov

DISMISSAL AND NOTICE OF RIGHTS

(This Notice replaces EEOC FORMS 161 & 161-A)

Issued On: 06/30/2022

To: Winston Banks P.O. Box 13417 Philadelphia, PA 19101

Charge No: 530-2022-04523

EEOC Representative and Legal Unit & Telephone Number 267-589-9707

DISMISSAL OF CHARGE

The EEOC is closing this charge because your charge was not filed within the time limits under the law; in other words, you waited too long after the date of the alleged discrimination to file your charge.

NOTICE OF YOUR RIGHT TO SUE

This is official notice from the EEOC of the dismissal of your charge and of your right to sue. If you choose to file a lawsuit against the respondent(s) on this charge under federal law in federal or state court, your lawsuit must be filed WITHIN 90 DAYS of your receipt of this notice. Receipt generally occurs on the date that you (or your representative) view this document. You should keep a record of the date you received this notice. Your right to sue based on this charge will be lost if you do not file a lawsuit in court within 90 days. (The time limit for filing a lawsuit based on a claim under state law may be different.)

If you file a lawsuit based on this charge, please sign-in to the EEOC Public Portal and upload the court complaint to charge 530-2022-04523.

On Behalf of the Commission:

Karen McDonough, Enforcement Manager

Cc:

Human Resources COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF TRANSPORTATION RA-IEDLR@pa.gov

Anthony Reda Pennsylvania Department of Transportation areda@pa.gov

Monica A Mika COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF TRANSPORTATION mmika@pa.gov

Please retain this notice for your records.